**Cannabis Legalization and Youth: Developing Clear Messages in an Evolving Policy Climate** 





"If you have a joint and you're smoking it for your private pleasure, you shouldn't be hassled."

~ Prime Minister Pierre Elliot Trudeau, 1977





### Anticipating Changing Health Demands for Canadian Youth Using Cannabis

A Public Health Perspective November 15th, 2018 Boulder, Colorado

Dr. Richard Stanwick Chief Medical Health Officer Island Health



# Disclosure

- I have no relevant financial relationships with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial services referenced in this public presentation.
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### Justin Trudeau, Prime Minister of Canada

• "young people have easier access to cannabis now, in Canada, than they do in just about any other countries in the world. [Of] 29 different countries studied by the U.N., Canada was number one in terms of underage access to marijuana. And whatever you might think or studies seen about cannabis being less harmful than alcohol or even cigarettes, the fact is it is bad for the developing brain and we need to make sure that it's harder for underage Canadians to access marijuana. And that will happen under a controlled and regulated regime."



### "The most disingenuous element of legalization is that it will keep it out of the hands of children," said Dr. Benedikt Fischer, a senior scientist at the Center for Addiction and Mental Health in Toronto. "It is a big

experiment, in many ways."



#### The Paradox of Prohibition



#### The Paradox of Prohibition



## Absence of evidence of harm is not evidence of absence of harm.



#### Public Release

#### Health Effects of Cannabis and Cannabinoids

Current State of Evidence and Recommendations for Research

This report will be available to download as a free pdf: Nationalacademies.org/CannabisHeal thEffects

The National Academies of SCIENCES • ENGINEERING • MEDICINE





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Hampers ability to quit smoking – THC impairs ability to reduce smoking & smoking impairs ability to quit cannabis.

> Presented at the Pediatric Academic Societies 2016 Meeting (Dr. Karen Wilson):

One in six infants and toddlers admitted to a Colorado hospital with coughing, wheezing and other symptoms of bronchiolitis tested positive for marijuana exposure.







### Overview

- Context Canadian Drugs
  Observatory
- 2. Federal Initiatives
- 3. BC Initiatives
- 4. Results that are currently available



# The Current Federal Solution Assistant Deputy Minister Committee and Data Working Group





Prevalence of drug use > Cannabis > Lifetime prevalence > All adults (15-84)					
Download as Excel file ( xisx)					
Search:					
Country					Total 🗢
Austria	2015	3477	25.5	21.5	23.6
Beigkm	2013	4931	18.8	11.1	15
Bulgaria	2012	5325	10.7	4.2	7.5
Crostia	2015	4959	25.8	13	19.4
Cyprus	2016	3500	19	5.5	12.1
Czech Republic	2015	859	37.6	21.3	29.5
Denmark	2013	10470	42.8	29.7	35.6
Estonia					

- Public health guidance on active case finding of communicable diseases in prison settings
- Cannabis and driving: questions and answers for policymaking
- Risk assessment on CUMYL-4CN-BINACA
- Risk assessment on ADB-CHMINACA
- Darknet markets ecosystem
- Reitox Development Framework
- Wastewater analysis and drugs
- EMCDDA–Europol Joint Report on a new psychoactive substance: cyclopropylfentanyl
- EMCDDA–Europol Joint Report on a new psychoactive substance: methoxyacetylfentanyl
- Environmental substance use prevention interventions in Europe
- Programming document 2018–20
- Drug squads: units specialised in drug law enforcement in Europe
- Developing drug supply monitoring in Europe: current concepts
- Risk assessment on furanylfentanyl
- Risk assessment on acryloylfentanyl
- Drugnet Europe 100
- Drugs and the darknet: perspectives for enforcement, research and policy
- Appendices for Systematic review on active case finding of communicable diseases in prison settings
- Systematic review on active case finding of communicable diseases in prison settings
- Drug testing in schools



Canadian Drugs Observatory ✓ A comprehensive picture of the current drug situation ✓ Identify emerging drug issues Track the impact of interventions Facilitate data sharing, foster collaboration, and support surveillance activities for all stakeholders



# Draft CDO Indicator Framework

#### PREVENTION

Access to substances that have a potential for problematic use Perception of risk associated with substance use Prescriptions practices Public awareness related to substance use Prescribers by type Public education School and community connectedness Pharmacy inspections

#### TREATMENT

Availability of non-opioid pain relievers Demand for publicly available treatment Treatment access Treatment outcomes Availability of non-pharmacologic treatment options Alternatives to prison Assistance to drug users in prisons Social reintegration Demand for privately funded treatment

#### HARM REDUCTION

Substance-related infectious diseases Harm reduction services Supervised consumption services Potential unnecessary regulatory barriers Environmental Impacts

#### **ENFORCEMENT**

Diversion of pharmaceutical drugs and precursors Driving While Impaired/Driving Under the Influence Drug seizures Drug-related crime Samples analyzed by Drug Analysis Service, HC Market supply chains for illegal substances Street price of illegal substances Law enforcement training Licensed Producer Inspections Market (legal)

SITUATIONAL MONITORING

MONITORING

RESPONSE

Age of initiation of substance use Availability of illegal substances Economic impact of substance use Emerging substances Frequency of use Harm associated with substance use High-risk substance use Incidence of substance use Inclusion of people with lived and living experience in drug policy, program-making and evaluation Polysubstance use Prevalence in special or vulnerable populations

Prevalence of substance use among the general population Prevalence of substance use among young people Reasons for using substances Route/method of administration Social exclusion and disadvantage/stigmatization Substance use morbidity Substance use mortality Context of use Promotion of substances Substance use in prison Benefits of substance Evaluation, monitoring and research Federal Cannabis Initiatives - Social statistics system for the legalization

Basic surveillance measures
 Public health and health care
 Public safety and justice
 Other social statistics

Kathryn Wilkins, Benjamin Mazowita and Michelle Rotermann Stats Canada Preparing the social statistics system for the legalization of cannabis October 12, 2018 https://www150.statcan.gc.ca/n1/pub/75-006-x/2018001/article/54979-eng.htm







### Basic surveillance measures

- Frequency of use
- Quantity used
  - frequent users (daily or nearly daily) consume about three times that of once-a-month users.
  - accurate measures are difficult because a standard unit of cannabis undefined
  - Purpose of use medical, non-medical, or both
- Substantial proportions of cannabis users indicate they use it for both medical and nonmedical purposes



**Basic surveillance measures** Method of exposure:

Smoked, vaporized, consumed in edible products, or absorbed topically or other ways.

Socioeconomic, sociodemographic covariates

 ethnicity, age, gender, household income, labour force participation, education and Aboriginal identity



### Sources

- Canadian Tobacco, Alcohol and Drugs Survey
  - Potential substantial additional content for 2019, renamed the Canadian Alcohol and Drugs Survey
  - Focusing the survey on people aged 15 to 24 to track trends in use in minors
  - Also includes question on Aboriginal identity
- National Cannabis Survey
  - New rapid cross sectional, Internet-based survey



### Sources

- Other Statistics Canada surveys that measure general social trends which include cannabis.
  - **Aboriginal Peoples Survey**
  - General Social Survey
  - Survey of Household Spending for household spending on cannabis



### **Public Health and Health Care**

### Key indicators

- Age at first daily or regular use:
- Patterns of use: quantity, frequency etc.
- Anxiety and depression
- Cannabis harms
- Co-use with other substances
- Driving, operating machinery following use
- Use during pregnancy
- Medical consultations for cannabis



### Sources

### **Canadian Community Health Survey**

- The Cannabis Use Module is core content in 2019/2020.
- Large sample size, inclusion of 12- to 14-year-olds, rich array of variables
- Permits estimates at the provincial and regional level

### **Canadian Health Measures Survey**

- 2018/2019 includes new content related to cannabis use and frequency
- Lab testing for urinary THC and CBD under consideration validity testing of self reported cannabis use.

#### Canadian Health Survey on Children and Youth \*

- A new cross-sectional survey first time in 2019, aged 1 to 17
- Module related to cannabis use youth aged 12 to 17



### \* One of Many Partners - Education

Key indicators

- School absenteeism, academic performance and school completion
  - Source: Canadian Health Survey on Children and Youth



# Linkage of survey and administrative files

 Statistics Canada linkages of surveys to administrative databases e.g. Discharge Abstract Database, National Ambulatory Care Reporting System.



# **Other Federal Work**

- Proximity of Canadian households to cannabis retail locations
- Wastewater analysis
- Canadian Institutes of Health Research National standards to guide cannabis data collection and measurement. *Finding Consensus on Cannabis Data Measurement* workshop November 27th and 28th, 2018 in Ottawa.



FPT Cannabis Data Working Group Health

- Knowledge, Attitudes, and Behaviours
- Key gaps:
- Indigenous populations data on and off-reserve
- Impact of public education initiatives
- Impact on maternal/fetal health
- Problematic use and treatment



Canadian Institutes of Health Research



CIHR's cannabis initiative: Meeting the urgent need for more knowledge

Collaboration is essential for comprehensive impact

Rapid-response approaches to build research capacity

Scalable opportunities and new partnerships on the horizon



# Canadian Paediatric Surveillance Program

 Serious and life-threatening events associated with non-medical (recreational) cannabis use in Canadian children and youth - 2018 – 2020.



 The CPSP gathers data from over 2,500 paediatricians and paediatric subspecialists each month to monitor rare diseases and conditions in Canadian children.



## **BC** Initiatives

- Cross-ministry working group has been formed
- Draft data and monitoring framework developed
- Oversight of BC Cannabis Survey
- Considering work needed for data acquisition, coordination and development of evaluation plan



### BC Initiatives Data and Monitoring Framework

Categories of indicators BC based on policy goals:

- Goal 1: Prioritize the Health and Safety of British Columbians
- Goal 2: Reduce Crime and the Illegal Market
- Goal 3: Protect Children and Youth
- Goal 4: Address Drug Impaired Driving
- Goal 5: Support Economic Development
- Indicators are similar to those in federal framework



# BC Initiatives BC Cannabis Survey

- Adults > 19 years of age only no youth component.
- Planned sample size for Indigenous cannabis users, representative of age and gender at the provincial level was 400 completions.
- FN status by self-identification
- Anonymous, not to be linked with other data.



# **BC Initiatives for Children and Youth**

- Other potential data sources identified:
- Administrative data at the BC Ministry of Health – Discharge Abstracts Database, National Ambulatory Care Reporting System, Vital Statistics;
- McCreary Adolescent Health Survey;
- Road Safety BC roadside surveys;
- BC Coroners Service impaired driving fatalities and other events.



# A Preview of What Is Next in





# National Cannabis Survey

- National Cannabis Survey conducted quarterly throughout 2018 and into 2019
- Third quarter data
- 15% (4.6 million) of Canadians aged 15 and older use cannabis
- Nova Scotia 23%
- British Columbia 20%
- Quebec 10%
- Males (18%) vs females (12%)




### Frequency of cannabis use by Canadians in the past 3 months





Once or Twice Monthly Weekly 3% Did not use Daily or almost daily 85% 6% Figures do not add due to rounding. Spending on cannabis in the past three months, Canada 3<sup>rd</sup> quarter, 2018



### DID YOU KNOW?

### OVER THE PAST THREE MONTHS ...



67% of Individuals who used cannabis once or twice spent nothing for it



36% of weekly or monthly users spent between \$1 and \$100 on cannabls



54% of daily or almost daily users spent over \$250 on cannabis

### Catalogue number: 11-627-M | ISBN: 978-0-660-27278-8

For more information, please check out our Cannabis Stats Hub at www.statcan.gc.ca

Also visit: www.canada.ca/en/services/health/campaigns/cannabis.html

### BLUNT TALK: www.mcs.bc.ca





HARMS ASSOCIATED WITH EARLY AND FREQUENT CANNABIS USE AMONG BC YOUTH



# Youth who had tried cannabis



### Age of first use Age first tried marijuana



#### Note: Among youth who had tried marijuana



# Youth aged 12 or younger

	Used marijuana	Had not used marijuana
Good/excellent overall health	80%	93%
Health condition or disability	40%*	19%
Suffered a serious injury in past	45%*	23%
Attempted suicide	17%*	3%
Sexually abused	28%	2%
Had supportive adult in family	53%*	85%
Tried alcohol	76%	5%







# Poison Control Call Records



BC Centre for Disease Control An agency of the Provincial Health Services Authority





National Collaborating Centre for Environmental Health

Centre de collaboration nationale en santé environnementale

environmental health services, BCCDC & national collaborating centre for environmental health BCCDC Grand Rounds+ June 19, 2018



# THIS IS NOT A FLASH DRIVE.









## Costs of Substance Use in Canada

http://csuch-cemusc.ccsa.ca/Resource%20Library/CSUCH-Canadian-Substance-Use-Costs-Harms-Report-2018-en.pdf



# THANK YOU

